



Disaster relief and recovery after a landslide at a small, rural hospital in Guatemala

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Abstract:

INTRODUCTION: Though many reports have assessed hospital emergency responses during a disaster that affected the facility's operations, relatively little work has been dedicated to identifying factors that aid or impede the recovery of such hospitals. **PROBLEM:** On 05 October 2005, Hurricane Stan triggered landslides that buried an impoverished Mayan community in Santiago Atitlan, Guatemala. The six-bed Hospitalito Atitlan also was in the landslide's path. Though opened just months earlier, the institution maintained 24-hour services until reopening in a new facility only 15 days after the landslides. **METHODS:** This qualitative study examined the Hospitalito Atitlan's disaster recovery using unstructured interviews with key hospital personnel and community members. Participant observation provided information about institutional and cultural dynamics affecting the hospital's recovery. Data were collected retrospectively during June-September 2006 and June 2007. **RESULTS:** The Hospitalito's emergency responses and recovery were distinct endeavors that nonetheless overlapped in time. The initial 12 hours of disorganized emergency relief work was quickly succeeded by an organized effort by the institution to provide inpatient and clinic-based care to the few severely injured and many worried-well patients. As international aid started arriving 2-3 days post-landslide, the Hospitalito's 24-hour clinical services made it an integral organization in the comprehensive health response. Meanwhile, a subset of the Hospitalito's non-clinical staff initiated rebuilding efforts by Day 2 after the event, joined later by medical staff as outside aid allowed them to hand off clinical duties. Effective use of the Internet and conventional media promoted donations of money and supplies, which provided the raw materials used by a group determined to reopen their hospital. **CONCLUSIONS:** Early work by a recovery-focused team coupled with a shared understanding of the Hospitalito as an institution that transcended its damaged building drove the hospital's rapid post-emergency revival. Encouraging a similar sense of mission, emulating the Hospitalito's handling of funding and material procurement, and conducting rebuilding and relief efforts in parallel may aid recovery at other health facilities.

Source: Ask your librarian to help locate this item.

Resource Description

Communication:

resource focus on research or methods on how to communicate or frame issues on climate change;
 surveys of attitudes, knowledge, beliefs about climate change

A focus of content

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Communication Audience:

audience to whom the resource is directed

Public

Exposure :

weather or climate related pathway by which climate change affects health

Extreme Weather Event

Extreme Weather Event: Hurricanes/Cyclones, Landslides

Geographic Feature:

resource focuses on specific type of geography

Rural

Geographic Location:

resource focuses on specific location

Non-United States

Non-United States: Non-U.S. North America

Health Impact:

specification of health effect or disease related to climate change exposure

Injury

Medical Community Engagement:

resource focus on how the medical community discusses or acts to address health impacts of climate change

A focus of content

Mitigation/Adaptation:

mitigation or adaptation strategy is a focus of resource

Adaptation

Resource Type:

format or standard characteristic of resource

Research Article

Resilience:

capacity of an individual, community, or institution to dynamically and effectively respond or adapt to shifting climate impact circumstances while continuing to function

A focus of content

Timescale:

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time period studied

Time Scale Unspecified